		I		4	744	9		· ·				
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application or Docket Number  09827788												
	•	CLAIMS AS	Golumn		SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY							
TOTAL CLAIMS			20				RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE		355.00	OR	Basic Fee	710.00
TOTAL CHARGEABLE CLAIMS			2 Ominus 20=		. 0		×	X\$ 9~		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		. 0		×	X40=		OR	X60=	
MEL	LTIPLE DEPEN	DENT CLAIM P	RESENT			1135-		35.		OR	+270=	
"If the difference in column 1 is less than zero, enter "o" in column 2.								TAL	355	OR	TOTAL	
CLAIMS AS AMENDED - PART II /- / / / / (Column 1) (Column 2) (Column 3)									ENTITY	OR	OTHER SMALL	• • • • • • • • • • • • • • • • • • • •
AMENDMENT A		CLAIMS REMAINING AFTER AMENOMENT		PREVI	(EST BER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DAG	Total	e .	Minus	-110	CLA	MS	×	9=		OR	X\$18=	
ME	Independent	•	Minus	L	ist	€D	X40=	10=		CR	X80=	
HRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								35=		OR	+270=	
2/25/06							<u></u>	OTAL			TOYAL	
(Column 1) (Column 2) (Column 3)								i, fee		,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA	R	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	. 19	Minue	. 3	20	- /	×	9=		OR	X\$18=	
NE CENTRAL PROPERTY AND PROPERT	Independent	· 3	Minus	•••	3	-(	l x	10=	/	OR	X80=	,
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							35-	/	1	+270=	/
3-25-06								TOYAL	-	OR	TOTAL	
(Column 1) (Column 2) (Column 3)								T. FEE	<b>L</b>	,	ADOIT. FEE	
ENTC		CLAMS REMAINING AFTER AMENDMENT		NUA PREVI	REST BER CUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 14	Minus	• 6	20	- /	×	9=		OR	X\$18=	
	Independent	· W	Minus	•••	3	-/_	x	10-		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1~~		<del></del>

\* If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

"If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

"If the Polyhest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The Polyhest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-075 (Ros. \$400)

OR

+135=

+270=

OR ADDIT. FEE